

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101563087

FILING DATE

12-30-05

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		2	1			
3		2	1			
4			1			
5						
6						
7						
8						
9	1		1			
10			1			
11		8	1			
12		8	1			
13			1			
14			1			
15						
16						
17		4				
18		8				
19		8				
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49						
50						
TOTAL IND.			6			
TOTAL DEP.			17			
TOTAL CLAIMS			23			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						